

ADA and Physician Compliance with Deaf or Hard of hearing patients

When a patient presents to the physicians office that is “deaf or hard of hearing” the requirement of providing an interpreter depends on effective communication. When you have questions regarding a “deaf or hard of hearing” patient the ADA requires the physician to provide an interpreter if there is no other means of effective communication. So, you must absorb this fee, as a cost of doing business.

However, not every patient/doctor visit requires the use of interpreter. Whether you are required to provide an interpreter or not, depends on one variable – **COMMUNICATION.**

There are two controlling Federal Laws – the Rehabilitation Act of 1973 and the Americans with Disabilities Act. The requirement is for the healthcare provider to have effective communication with the patient. Effective communication does not require an interpreter, and the key factual issue is whether other means may provide effective communication (i.e. Handwritten Notes passed back and forth; Family member with the patient who can interpret; etc.). So, if you are able to effectively communicate with your patient without an interpreter, you may do so without violation of the Federal Laws. But, if you are unable to effectively communicate, then the ADA makes it a requirement that you provide an interpreter, at your own expense. This expense is **NOT ALLOWED** to be billed to the client – and will become a cost of doing business.

However, keep in mind the Courts have held that providing adequate medical treatment is NOT a defense to a claim that the healthcare provider failed to provide effective communication under the Federal Laws.